SCHEDULE A (FEC Form 3X)  Use senarate schedule(s)			Use separate schedule(s)	FOR LINE NUM	
TEMIZED RECEIPTS			or each category of the	(check only one)	
			Detailed Summary Page	I <del></del>	11b 11c 12 14 15 16 17
An	y information copied from such Reports and Sta	tements may	not be sold or used by any perso		
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
\	NAME OF COMMITTEE (In Full)				
	Democratic Executive Committee of Flo	rida			
Δ.	Full Name (Last, First, Middle Initial) Ramon Cernuda			Date of Rece	aint .
	Mailing Address 3155 Ponce De Leon Blvd.				D D / Y Y Y Y
				1 0	24 2006
	City	State Zip Code		<b>Transaction ID:</b> 11ai-000067138	
	Coral Gables	FL	33134	Amount of Ea	ach Receipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer Cernuda Art Gallery	Occupation Director			
	Receipt For:	Aggregate Year-to-Date ▼			
	Primary General	75.0		1	
	Other (specify)		250.00		
3.	Full Name (Last, First, Middle Initial) AFL-CIO Cope Treasury Account			Date of Rece	eipt
	Mailing Address 815 16th Street NW				25 2006
	City	State	Zip Code		ID: 11ai-000068430
	Washington	DC	20006		ach Receipt this Period
	FEC ID number of contributing				
	federal political committee.	C			5000.00
	Name of Employer American Federation of La-	Occupation	<u> </u>	$\dashv$	
	American Federation of La- bor and Congr	Political I			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		5000.00	1	
	Other (specify)		0000.00		
— Э.	Full Name (Last, First, Middle Initial) Megan Ferguson			Date of Rece	eipt
	Mailing Address 225 W. 10Th St., Apt. 3C			M M /	D D / Y Y Y Y
				10	31 2006
	City Now York	State	Zip Code		ID: 11ai-000068438
	New York	NY	10014	Amount of Ea	ach Receipt this Period
	FEC ID number of contributing federal political committee.	C			2500.00
	Name of Employer	Occupation	n		
	Provide Form	Attorney	Versite Dete	_	
	Receipt For: Aggregat Primary General		e Year-to-Date ▼	. [	
	Other (specify)		2500.00		
	(1 · n) <b>∀</b>		0 0 0 0 0 0 0		
SUBTOTAL of Receipts This Page (optional)					
TOTAL This Period (last page this line number only)					
-	- Contract C	,,			